ForwardHealth interChange Internet Partner Portal Training Guide For Division of Juvenile Corrections Staff

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Version 2.3				
Version 2.4		_		

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Table of Contents

Τ	Introduction	
	1.1 Introduction	1
	1.2 Purpose	1
	1.3 Key Terms and Concepts	1
	1.3.1 ForwardHealth Wisconsin	
	1.3.2 ForwardHealth InterChange (iC)	
	1.3.3 Key Terms	
2	·	
_	2.1.1 Passwords & Security	
	ForwardHealth Partner Portal	
	ForwardHealth interChange Password Problems	
3		
3		
	3.1 Access the Partner Portal	
	3.2 Request Secure Partner Site	
	3.3 Log into the Partner Portal	
	3.3.1 Business Objects WebI	
4	Accessing the Manual Certification Screens	
	4.1 BadgerCare Plus/Medicaid Manual Certification	
	4.1.1 Initial Information Panel	
	4.1.2 Process for Adding a New Case (Cert. 1)	
	Eligible Case Member Panel	
	Summary Panel	
	4.1.3 Process to Modify or Add a New Member to an Existing Case (Cert. 3 or 4)	21
	Initial Information Panel	. 21
	Verify Member Panel	. 22
	Case Head Information Panel	. 23
	Eligible Case Members Panel	. 25
	Summary Panel	
5	·	
6		
7		
•	7.1 Member	
	7.1.1 Member Search	
	Search for a Member Record Using a Member's Name	
	7.1.2 Member Information Panel	
	7.1.3 Member Maintenance Navigation Panel	
	Member ID Cards Panel	
	Worker ID Panel	
	7.1.4 Other ID Search	
	7.1.5 Previous Data	
	7.1.3 Previous Data	
	7.2.1 TPL Search	
	7.2.2 TPL Information Page Graphic	
	7.2.3 TPL Maintenance Navigation	
	Absent Parent	
	Additional Polices	
	Base Information Panel	
	Coverage Panel	
	Members of Policy	. 51

7.2.4 TPL Related Data	51
Absent Parent	
TPL Other - Carrier Panel	
8 Provider	
8.1.1 Provider Search	55
8.1.2 Provider Information Page	
8.1.3 Provider Information Panel	
8.2 Claims Search	57
8.2.1 Claim Search Panel	57
8.2.2 Claims Search Results Panel	58
9 General Portal Information	60
9.1 Logging On and Off the Portal	60
9.2 Portal Navigation	60
9.2.1 Buttons	
9.2.2 Error Messages	62
9.3 Partner Portal Online Help	
9.3.1 Panel Help	
9.3.2 Field Help	
10 Contact Information	64
Appendix A - ForwardHealth Benefit Plans	66

1 Introduction

1.1 Introduction

This document is a training guide for the navigation and use of the public and secure areas of the **ForwardHealth Partner Portal**.

The ForwardHealth public Partner portal replaces EDSNET and supplies users with online functionality that offers greater flexibility along with the ability to access real-time information.

1.2 Purpose

The purpose of this document is to provide users with an overview of the components that make up the ForwardHealth interChange Partner portal and to provide instruction on how to navigate and perform basic functions in the system.

1.3 Key Terms and Concepts

1.3.1 ForwardHealth Wisconsin

- > ForwardHealth brings together many state health care programs with the goal of creating efficiencies for providers and other stakeholders and improving health care outcomes for enrolled members.
 - BadgerCare Plus.
 - Wisconsin Medicaid, including Family Planning Waiver.
 - Wisconsin Well Woman (WWW) Program and WWW Medicaid.
 - SeniorCare.
 - Wisconsin Chronic Disease Program (WCDP).
 - BadgerCare Plus and Medicaid managed care programs.

1.3.2 ForwardHealth InterChange (iC)

- ForwardHealth interChange is a new system which replaces the Medicaid Management Information System (MMIS) which has been in place since 1977.
- Connectivity to the legacy MMIS is being discontinued with the implementation of ForwardHealth interChange.
- > Partners will access the new system using the ForwardHealth Portal. The portal will provide access to key information that was previously found on EDSNET.

1.3.3 Key Terms

➤ **Member -** Replaces the term "Recipient". A Member represents an individual enrolled in any of the ForwardHealth health care programs in iC.

- ➤ **Member ID -** All members are assigned an ID. This number will replace the old MA ID number. The number is assigned from the Master Client Index (MCI) and will no longer include the SSN.
- ➤ **Benefit Plan** -Type of plan that designates the benefits covered and is based on the member's medical status code. Members may be enrolled in multiple benefit plans concurrently.
 - Example: SeniorCare and QMB.
 - Example: QMB and EBD Medicaid.
- ➤ **Enrollment -** Replaces the term "eligibility". Enrollment is used anytime a reference is made to a member who is eligible. A member may also be enrolled in a Managed Care program.
- Fiscal Agent EDS-HP is the fiscal agent for the Wisconsin Medicaid and ForwardHealth Programs.

2 Getting Started

2.1.1 Passwords & Security

ForwardHealth Partner Portal

General Password guidelines

- All portal users can change their password at any time. After logging in, you can click on the **Account** link on the secure Partner home page and then click the **Change Password** link on the Account home page.
- Portal account passwords expire every 60 days and users are prompted to change them.
- > The password you create **MUST** have at least **eight** characters.
- Passwords must contain at least one uppercase letter, one lowercase letter, and one number.
- Passwords must not contain your real name or user name.
- When resetting your password, you cannot use any of your previous eight passwords.
- If you forgot your password, you can reset it yourself by answering security questions you will be asked to provide when you change the initial password you receive.

ForwardHealth interChange Password Problems

For assistance with interChange password problems or any other questions on the Partner Portal, please contact the Portal Helpdesk at (866) 908-1363.

3 ForwardHealth Partners Home Panel

Step	Action	Response
1.	Click the portal icon on your desktop, or enter https://www.forwardhealth.wi.gov/	The public portal Home page displays.
	in the address bar in Internet Explorer, and click Go .	

ForwardHealth Main Portal Home Page Screen Graphic



ForwardHealth Main Portal Home Page Screen Description

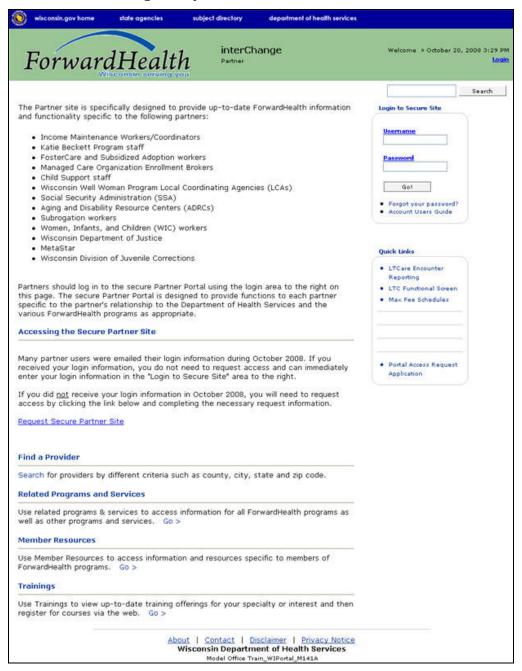
As you can see, the ForwardHealth Portal is divided into four main areas as
indicated by the four icons in the middle of the page. Users can click on an icon, or
the link below the icon, to go to that area of the portal.

• Today we are focusing on the secure Partner portal for Division of Juvenile Corrections Staff.

3.1 Access the Partner Portal

Step	Action	Response
1.	Click the Partners icon.	The Partners public portal home page displays.

Partners Home Page Graphic



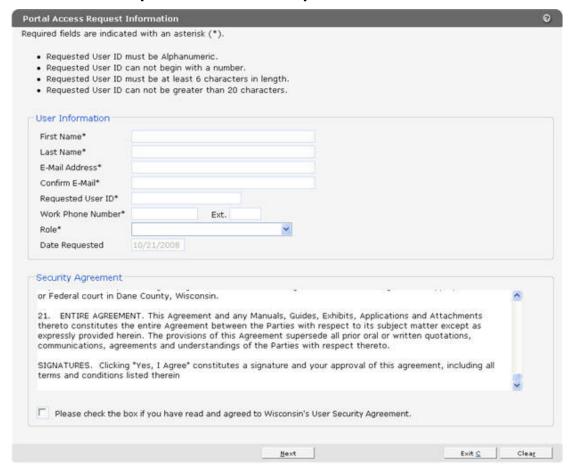
Partners Home Page Description

- As you can see, this screen provides links to some basic information that can be accessed by users who are not logged in, such as finding a provider and contact information for Members interested in applying for BadgerCare Plus benefits.
- On the left of the screen are text entry fields where users can enter their login information for access to the Partner secure site.
- If you received your login information, you do not need to request access and can immediately enter your login information in the "Login to Secure Site" area to the right.
- If you did **not** receive your login information, you will need to request access by clicking the **Request Secure Partner Site** link and completing the necessary request information.

3.2 Request Secure Partner Site

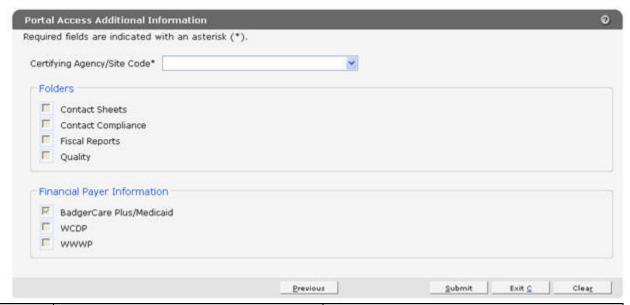
Step	Action	Response
1.	From Partners public portal home page, click Request Secure Partner Site .	The Portal Access Request Information panel displays.

Portal Access Request Information Graphic



Step	Action	Response
2.	Enter the requested information in all fields. All fields must be filled out.	
3.	Read the Security Agreement and check the box at the bottom of the screen to confirm that you read the agreement and agree to the conditions.	
4.	Click Next .	The Portal Access Additional Information screen displays.

Portal Access Additional Information



Step	Action	Response
3.	Use the drop-down menu at the top of the screen to select your Site Code.	
4.	Click Submit .	If there are no problems with the request, a confirmation message will display above the panel.
		If there is a problem with the request, an error message will display.

Confirmation Message

The following messages were generated:

Save was successful. If your request is approved, you will receive emails with your login credentials.

 Note that if your request is approved, you will receive emails with your login credentials.

3.3 Log into the Partner Portal

Step	Action	Response
1.	Enter your user name in the Username field.	
2.	Enter your password in the Password field.	
3.	Click Go .	The Partners secure page displays

ForwardHealth Partner Home Page Graphic



ForwardHealth Partner Home Page Screen Description

- Through the Partner portal, users can access the following functions:
 - o Enrollment verification
 - Account management
 - Member maintenance
 - TPL information
 - Provider information

- There are quick links that appear on the right of the screen:
 - Partner Application Forms to access applications available for online completion.
 - Replacement ID Card Request to request replacement ID Cards for members.
 - o **Business Objects WebI** where you can access various reports via the ForwardHealth data warehouse (See below).
- One of the features of the portal to help you track where you are is the navigation map, which is at the upper left of the screen, beginning with the Partners graphic:



- The link shows you which area of the secure portal site you are in, along with what tab or link you've clicked. You can also click on either the graphic or any of the links displayed after the graphic (e.g. **Partners**).
- Notice there are tabs along the top of this page, with Partners automatically selected:
 - Home Is the public portal Home page
 - Search Lets you search for information using a keyword.
 - o **Partners** Takes you to the Partners secure home page.
 - Enrollment Lets you search for a member's summary enrollment data.
 - Account— Lets you update the information associated with your Username and Password. You can set up, update and maintain account login credentials, change/reset passwords, assign roles for authorized employees, and read and manage messages pertaining to your account, such as your email.

Note: The Account tab let's you manage your account. Although we don't discuss this information in detail, there is a detailed user guide (the Account User Guide link) in PDF format for you to use if you need to change any of your account information.

- o **Contact Information** allows you to contact ForwardHealth with questions about the ForwardHealth programs and the Partner Portal.
- Site Map—Shortcut links to the main topics on the Partners portal.
- iC Functionality—Lets you access more detailed member information from interChange.

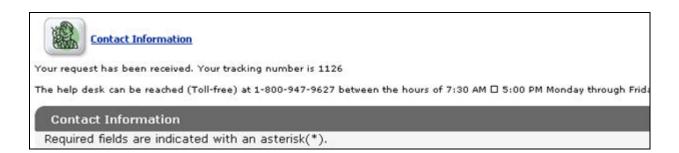
Note: You may notice that each time you click a tab, or move from screen to screen, you see the "this site contains secure and non-secure..." message. Click **Yes** to continue, if you see this screen. The message appears if your security level for your Internet is set to prompt you whenever you are about to display non-secure information, which you can change through Internet options, security.

3.3.1 Business Objects Webl

Step	Action	Response
1.	In the Quick Links panel on the secure partner home page, click the Business Objects WebI link.	The Webi Home page displays.



• Clicking the Business Objects WebI link directs you to the Business Objects Web Intelligence reporting tool, where you can access reports via the ForwardHealth data warehouse. You will need to have a login ID and password to access this site.



4 Accessing the Manual Certification Screens

- The BadgerCare Plus Manual Certification replaces the paper manual F-10110
 (3070). You will use this manual certification for all programs for which you currently use the paper manual certification, even though it is called the BadgerCare Plus Certification.
- You may continue to use the paper manual certification, but are encouraged to utilize
 this certification tool for routine and/or emergency enrollments. The update is
 immediate once you submit the certification and enrollment is there for providers to
 see moments after submission.

Step	Action	Response
1.	From the Partner's main screen, click the Partner Applications Forms link at the right, under Quick Links .	The Partner Applications Forms page displays.

BadgerCare Plus/Medicaid Manual Certification Screen Graphic



BadgerCare Plus/Medicaid Manual Certification Screen Description

- This **Partner Application Forms** link allows you to add or modify one or more case members' enrollment using BadgerCare Plus/Medicaid Manual Certification. You can also use this panel to add a new case with multiple members.
- Processing errors will be displayed as a red exclamation point next to the field or as a message at the top of the panel. Errors must be corrected before allowed to proceed to the next screen or with the certification submission.
- ID cards for new members will be mailed the following business day.

General Manual Certification Processing Notes:

- The system will time out if there is no activity for 30 minutes. However, the clock will re-set every time the user hits the "next" button.
- NEVER use your browser "Back" button to return to a previous screen. Always use the "Previous" button or click on the applicable link listed next to the Partners Icon above the manual certification panel.

4.1 BadgerCare Plus/Medicaid Manual Certification

4.1.1 Initial Information Panel

Step	Action	Response
1.	Click BadgerCare Plus/Medicaid Manual Certification.	The Initial Information panel displays.

Initial Information Panel Graphic



- The **Initial Information** screen requires you to choose one of two Certification Types.
 - a. Add a new case/member record. Equivalent to the old cert. 1
 - b. Modify, or add a new member to, an existing case. Equivalent to the old cert. 3 &4.
- If unsure which certification type to use, select "Modify" a case to start. If the member is not in iC, you will receive a message and can change the type to "Add".

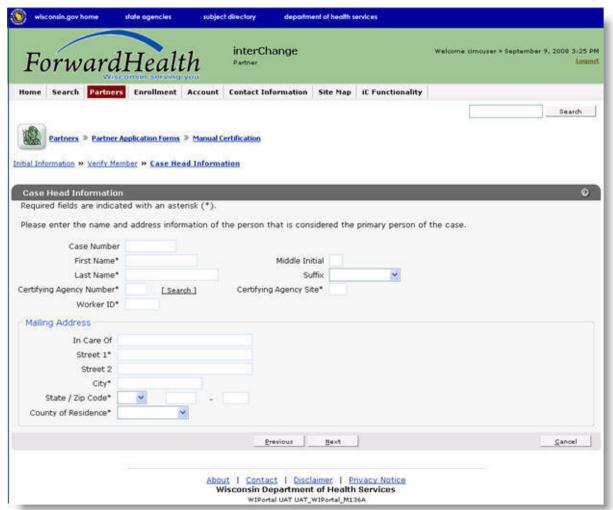
Note: You no longer have the ability to change the ID number of a member (the old Cert 5s) through the portal or any other means. Member ID number change requests must be called into EDS (See **Contact Information** at the end of the training guide). The reason for this policy/process change is that the MCI ID is considered a permanent ID; therefore, ID number changes should be very rare.

4.1.2 Process for Adding a New Case (Cert. 1)

Step	Action	Response
1.	Select Add a new case/member record and click Next.	The Case Head Information Panel displays.

• The Case Head information panel is used to add the new case head, or primary person, demographic data.

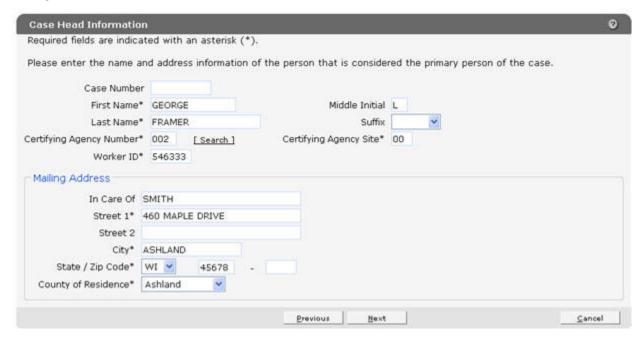
Case Head Information Screen Graphic



Case Head Information Screen Description

- In order to establish a new case head, enter the demographic data for the person who is considered the primary person of the case. If a one-member case, the member will be their own case head and you will enter the member's information here.
- You must enter the required case head information, to proceed to the next screen.
- Required fields are marked with asterisks.
 - The Case Number is not active with a new case certification. The case head ID will automatically be assigned in the iC system once you have submitted the manual certification.
 - First Name and Last Name for the case head.
 - Certifying Agency Number and Site if you know your county or certifying agency code plus the two digit site codes, enter the codes in these fields. If unsure you may click on the 'Search' link next to the field to display the Certifying Agency Number Data-Search Panel. See the following section for instruction on how to use this panel.
 - o **In Care Of** enter the name of the person or institution the case enrollment materials are sent to, if other than the case head/member.
 - Street1 field is required.
 - Street2 should be used for additional address information such as apartment, suite, etc.
 - o **City, State/Zip Code** are required. The 4-digit zip add-on is not required.
 - County of Residence is a drop-down list box to select the member's actual residence county. The certifying agency and county of residence will be held separately in the new system.
 - In addition to the **Previous** and **Next** buttons, you also see a **Cancel** button.
 This button will take you completely out of the manual certification back to the Partner Application Forms page.
 - Here's an example of a completed panel:

Completed Case Head Panel



Step	Action	Response
2.	Once you have reviewed the information on the completed panel, click Next .	The Eligible Case Members panel displays.

Certifying Agency Number Data-Search Panel

Step	Action	Response
1.	Click the Search link next to the Certifying Agency Number field.	The Certifying Agency Number Data- Search Panel displays

Certifying Agency Number Data-Search Panel Graphic



Step	Action	Response
2.	The fastest way to locate your agency and site is to enter your agency name in the Certifying Agency Name field.	
	Note: Agency codes that are not based on actual county codes have been assigned new agency codes and sites. Please refer to the Agency Listings in the appendix at the end of this guide.	
3.	Click Search .	The Search Results panel will populate with the results of your search. If you enter a partial description, more than one result will display.

Certifying Agency Number Data-Search Search Results Panel Graphic

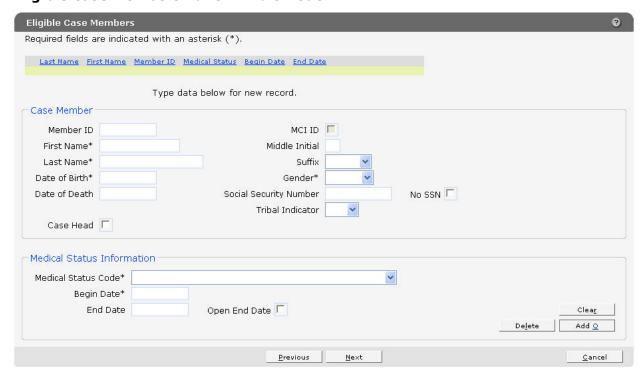


Step	Action	Response
4.	Select a record from the results list.	The Data-Search panel closes and the information automatically populates the correct fields on the Case Head Information panel.

Eligible Case Member Panel

Step	Action	Response
1.	Click Add .	The Eligible Case Members panel is now in edit mode, meaning users can enter information for the new case member.

Eligible Case Members Panel in Edit Mode

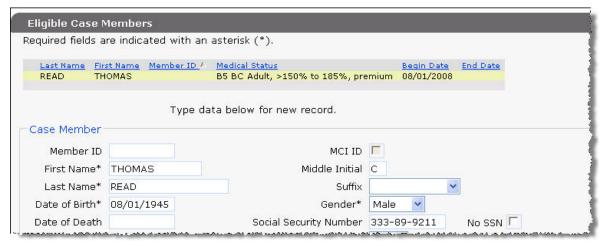


Eligible Case Member in Edit Mode Panel Description

- The Eligible Case Members panel allows you to add demographic and enrollment information for case members.
- Enter the case head enrollment information first and check the Case Head box. This
 will establish a case head record in iC and associate all new members to this case
 head.
- As you add additional members, information on the previous member entered is shown at the top of the panel. If you wish to change member data, click on a member in the list and the fields will populate with information previously entered. You can then change any field.

- Many of the fields on this panel are self-explanatory, but a few warrant some discussion:
 - The **Member ID** field is not active for a new Add. As with the case head ID, once the process is complete the member will automatically be assigned a member number in the iC system.
 - The Medical Status Code. Select a med stat code from the drop-down list. This
 list will include all med stats used by all certifying agencies. Be careful when
 selecting med stats ensure you are using codes that pertain to your specific
 program.
 - Every member must have a **Begin Date** and an **End Date**. Use caution if using the open end date. If the member enrollment is not routinely monitored and terminated, if appropriate, the enrollment will stay open indefinitely.
- Also note that besides the Add button, there is also a Clear button, which removes values in all the fields on this panel, and a Delete button, which removes the members selected from the list that have been added to the current case on the manual certification. This action will not delete an existing member from iC. The Cancel button returns user to the Partner Application Forms page.

Completed Eligible Case Member Panel



Step	Action	Response
2.	Once you've reviewed the information on your completed panel, either click Add , to add additional members or click Next .	If clicking Add , the information you entered for the first member appears at the top of the panel and the data fields are cleared for new data entry.
		If Next is chosen, you will proceed to the Summary panel. If you wish to verify member information entered, select Previous to return to the Eligible Case Members panel.

Summary Panel

Step	Action	Response
1.	Review the Summary panel.	

Summary Panel Graphic



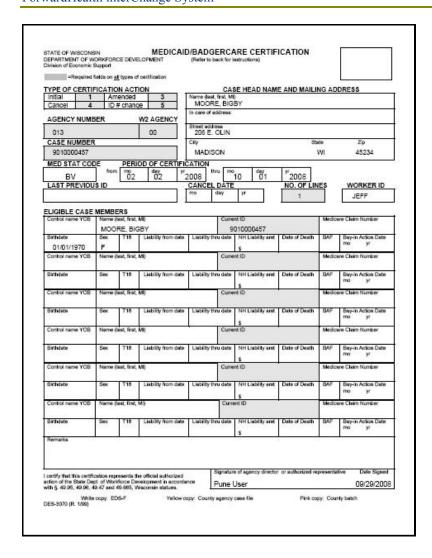
Summary Panel Description

- This screen is your last chance to go back and make any changes before you Submit
 the manual certification. You can click the Preview your request link to display a
 PDF version of the manual certification form.
- New case head and member IDs are not populated on this version of the PDF. The IDs will be assigned once the certification is submitted.

Step	Action	Response
2.	When you are sure everything is correct, click Submit .	Any errors will appear at the top of the panel and must be corrected in order to resubmit the certification. If no errors, the Complete Panel will appear. Once the certification is submitted for the new case, iC will update immediately.



- You may select the **View your request** link to display the completed certification PDF which will include the Case Head and Member IDs that have been assigned by the system.
- A separate PDF will appear for each member.
- This version must be printed or saved as a Word document for importing if you want to keep a record of the certification. Once you leave the certification you've just completed, the PDF form will no longer be viewable for printing or saving as a word document.
- The PDF document should not be sent via mail or fax to EDS, because the
 information you entered online will be submitted in real time—sending by mail or fax
 is unnecessary.



4.1.3 Process to Modify or Add a New Member to an Existing Case (Cert. 3 or 4)

Initial Information Panel

Step	Action	Response
	Click BadgerCare Plus/Medicaid Manual Certification.	The Initial Information panel displays.

Initial Information Panel Graphic



Step	Action	Response
2.	Select Modify, or add a new	The Case Head Information Panel will
	member to, an existing case and	display.
	click on Next.	

Verify Member Panel

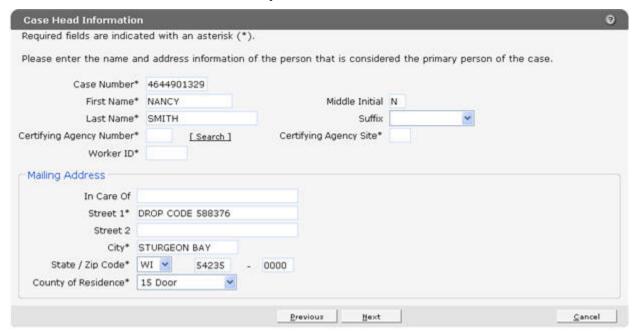
• The Verify Member Panel is used to verify that a specific member or case head record exists in the system. This panel will only display with the "**Modify**" certification type.



Step	Action	Response
3.	Enter the Case Head ID in the text entry field.	
4.	Click Next .	The Case Head Information panel displays with all case head demographics populated from iC. (See graphic below.) If the member ID does not exist, you will receive an error message. You can click on the Previous button to return to the Initial Information page to change the certification type to "Add".

Case Head Information Panel

Case Head Information Screen Graphic

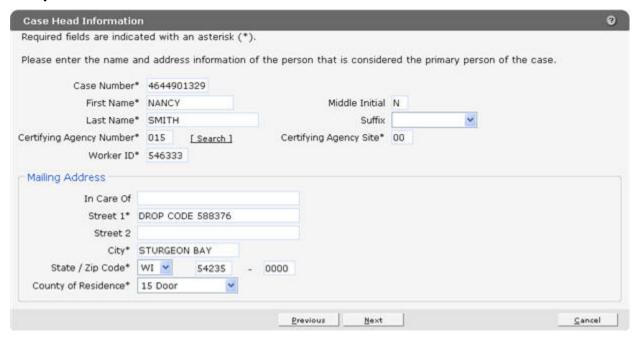


Case Head Information Screen Description

- The existing case head demographic data will display, with the exception of certifying agency, site and worker ID. You may change the demographic data displayed or make no changes; however, you must enter the certifying agency, site and worker ID information, to proceed to the next screen.
- Required fields are marked with asterisks.
 - The Case Number is populated with the current case head ID that is on iC. It
 may be a different ID than the one entered in the previous screen, if the case
 head has a new number.
 - o The **Certifying Agency Number** and **Site.** Description of the Certifying Agency search table was described in the Process for Adding a Case, above.

- If there is data entered in the optional address fields that you want to remove from iC, you must delete the data from the field.
- In addition to the **Previous** and **Next** buttons, you also see a **Cancel** button. This button will take you back to the Partner Application Forms page.
- Here's an example of a completed Case Head panel:

Completed Case Head Panel

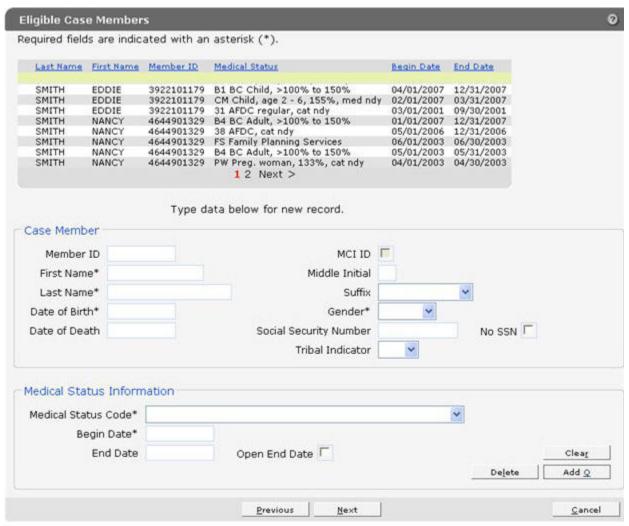


Step	Action	Response
5.	Once you have reviewed or modified the information on case head panel, click Next .	The Eligible Case Members panel displays with all case members listed.

Eligible Case Members Panel

Step	Action	Response
1.	Click on a member in the list to modify information or click Add to add a member to the existing case.	The Eligible Case Members panel is now in edit mode, meaning users can modify or add information.
	Note: Do not click on Add if adding new enrollment for an existing member.	

Eligible Case Member in Edit Mode Panel Graphic

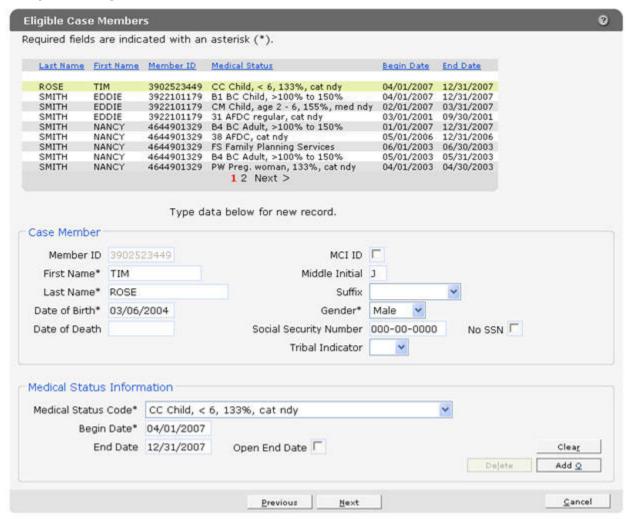


Eligible Case Member in Edit Mode Panel Description

- The Eligible Case Members panel allows you to modify or add demographic and enrollment information for case members.
- If there are multiple members, they are listed at the top of the panel along with the enrollment data currently in iC. Clicking on a member displays and information for that member.

- Many of the fields on this panel are self-explanatory, but a few warrant some discussion:
 - The Member ID will populate with the current ID on iC.
 - If adding a member, the ID field will not be active, just as in the Adding a New Case. However, if you know the member already has an MCI ID, check the MCI ID box. (For example, they are in CARES with an MCI ID but not on iC yet). Otherwise, leave the MCI ID box unchecked for the system to assign the ID.
 - The Medical Status Code. Select a med stat code from the drop-down list. This
 list will include all med stats used by certifying agencies. Use caution to only use
 the med stats that pertain to your program.
 - You may extend the **Begin Date** to an earlier date and/or extend the **End Date** for a selected row.
 - To add a new period of eligibility for an existing member do NOT use the **Add** button. The **Add** button is only used to add a <u>new</u> member to a case. Instead, select the member's row showing the most recent enrollment. When the fields populate, change the med stat and/or enrollment dates. This will establish the new eligibility on file while preserving the previous eligibility.

Completed Eligible Case Member Panel



Step	Action	Response
2.	Once you've reviewed the information on your completed panel, either click on another member, Add , to add additional members or click Next .	If clicking Add , the information you entered for the first member appears at the top of the panel. If Next is chosen, you will proceed to the Summary panel. If you wish to verify member information entered, select Previous to return to the Eligible Case Members panel.

Summary Panel

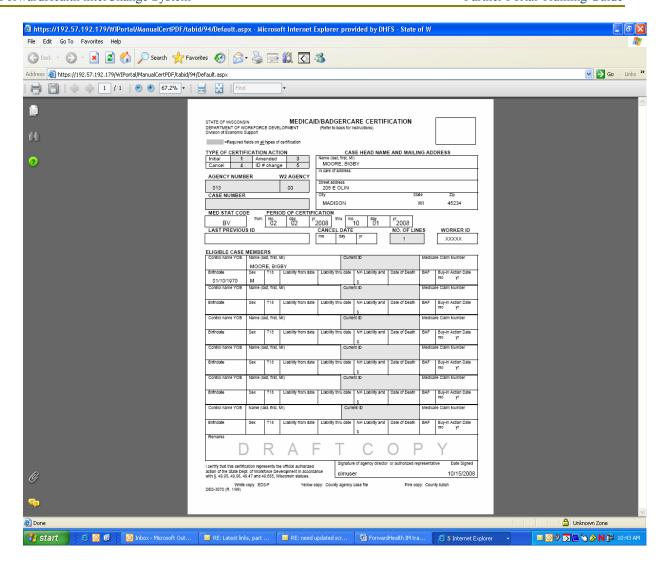
Step	Action	Response
1.	Review the Summary panel.	

Summary Panel Graphic



Summary Panel Description

- This screen is your last chance to go back and make any changes before you Submit
 the manual certification. You can click the Preview your request link to display a
 PDF version of the manual certification form for each member and period of
 enrollment.
- As with the Add certification type, if you've added a new member, their ID is not populated on this version of the PDF. The IDs will be assigned once the certification is submitted.



Step	Action	Response
2.	When you are sure everything is correct, click Submit .	The BadgerCare Plus/Medicaid Manual Certification data is submitted to EDS. If no errors, the Complete panel will appear. If errors are detected, message(s) will appear at the top of the panel. These must be corrected in order to resubmit the certification.
		Once the certification is submitted, iC will update immediately.



- You may select the "View your request" link to display the completed certification PDF which will include the Case Head and Member IDs that have been assigned by the system.
- A separate PDF will appear for each member.
- This version must be printed or saved as a Word document for importing if you want to keep a record of the certification. Once you leave the certification you've just completed, the PDF form will no longer be viewable for printing or saving as a word document.
- The PDF document should not be sent via mail or fax to EDS, because the
 information you entered online will be submitted in real time—sending by mail or fax
 is unnecessary.

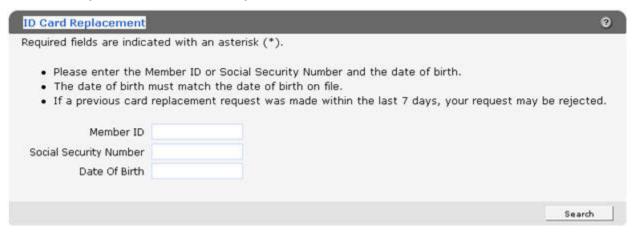
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5 Replacement ID Card Request

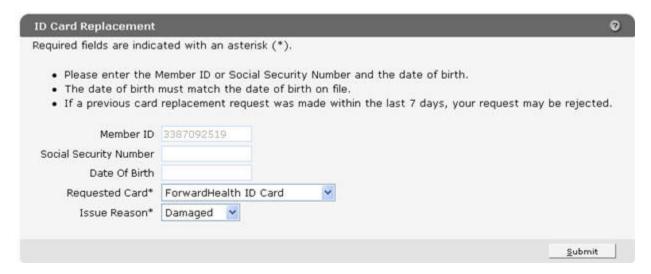
Step	Action	Response
1.	From the Quick Links panel on the right of the Partner home page, click Replacement ID Card Request .	The ID Card Replacement panel displays.

Note: This ID card replacement function is available and optional to workers. IM workers should still refer members to Member Services for replacement cards. Effective 11/10/08, the member can go to ACCESS.wi.gov to request a replacement card if they have an ACCESS account.

ID Card Replacement Panel Graphic



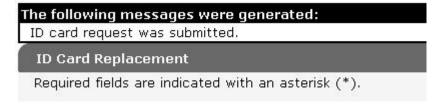
Step	Action	Response
1.	Enter either the Member ID , or the member's Social Security Number and Date of Birth .	
2.	Click Search .	If a member with eligibility is found, the panel refreshes with two new fields to enter further information.



Step	Action	Response
3.	In the Requested Card field, enter the card that is being requested.	
4.	In the Issue Reason field, enter the reason a new ID card is being requested.	
5.	Click Search .	If there are no problems with the request, a confirmation message will display above the panel.
		If there is a problem with the request, an error message will display.

- If the member is not currently eligible for one of the ForwardHealth programs, a message will display indicating that the member does not have eligibility.
- If the member has had an ID card request processed within the last 7 days, a
 message will appear rejecting the request. The reason for this is, if the member has
 had a card recently reissued, they may not have yet received the card and another
 card request is not necessary.

Successful Request



6 Enrollment Verification

Users can check a member's eligibility using the Enrollment Verification panel in the Enrollment section of the Secure Partner web.

Step	Action	Response
	From the Partner main menu at the top of the page, click Enrollment .	The Enrollment Verification panel displays.

Enrollment Verification Panel Graphic



Step	Action	Response
1.	Select the program for which you want to certify eligibility from the Program drop-down menu.	
2.	Enter either the Member ID , or the member's Social Security Number and Date of Birth .	
3.	Enter the From Date of Service and To Date of Service , which are required fields.	
4.	Click Search .	The panel refreshes with the Member's eligibility information.

Enrollment Verification Graphic



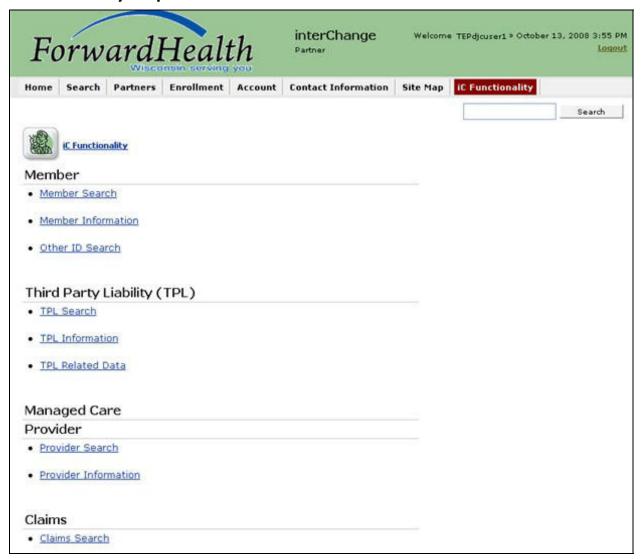
- The results show the Financial Payer, Benefit plan, and Medicare coverage if any, and the effective and end dates of the plans.
- If there is no coverage for the member, a message will display.

7 iC Functionality

This section shows users how to access interChange information via the secure Partner Portal.

Step	Action	Response
1.	Click the iC Functionality tab.	A list of information panels users can access from interChange displays.

iC Functionality Graphic



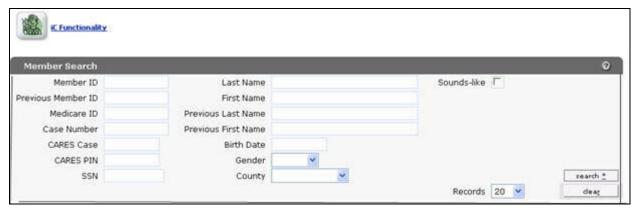
Let's start with Member iC Functionality.

7.1 Member

7.1.1 Member Search

Step	Action	Response
1.	From the list of iC Functionality links, click Member Search .	The Member Search panel displays.

Member Search Panel Graphic



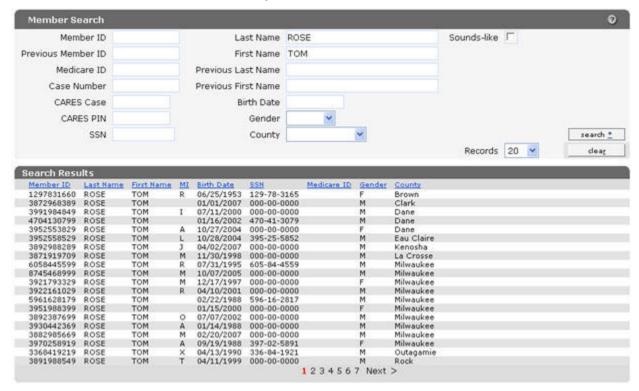
Member Search Panel Description

- This panel allows you to search for a member using any of the fields displayed.
- Once you have entered information in the fields, click **Search** to initiate the search. Clicking the **Clear** button clears the information from all the fields.
- If searching by Member ID and the record is not found. Enter the ID in the Previous Member ID field in case the member's ID has changed.
- The Sounds-like checkbox on this panel can be used when you are searching by a
 member's name and are not sure of the correct spelling. Clicking the Sounds-like
 check box performs a phonetic search on the information contained in the last
 name field.
- To narrow down the results of your search, enter as much information about the member as possible.
- The **Records** drop-down is used to set the maximum number of records per page that are returned.

Search for a Member Record Using a Member's Name

Step	Action	Response
1.	Enter the member's last name in the Last Name field.	
2.	Enter the member's first name in the First Name field.	
3.	Click Search .	The Search Results panel displays.

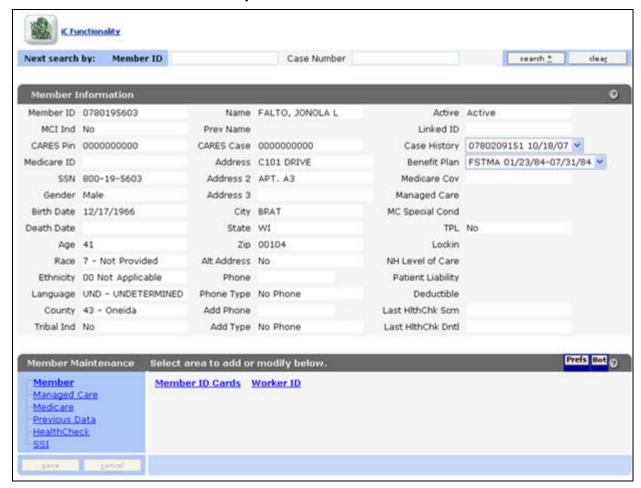
Member Search Results Panel Graphic



- If there was more than one member that meets the entered criteria, the list of members matching the entered criteria displays on the Search Results panel.
- Columns display for each record found in the search. You can click on a column heading to sort your results. Clicking a column once will sort the results in ascending order by that column. Clicking the column a second time sorts them in descending order.
- Selecting a row will populate the member information panel.

Step	Action	Response
3.	Click on the row you wish to view.	The Member Information panel displays.

Member Information Panel Graphic



Member Information Panel Graphic

- The Member Information page is comprised of three separate panels including:
 - The mini-search panel that allows you to search for a new member record using a Member ID or Case Number.
 - The **Member Information** panel, located in the middle of the page, displays basic information about the member.
 - The Member Maintenance navigation panel, located at the bottom of the page is the access point for panels that contain more detailed member data. Let's take a look at the information on the Member Information panel.

7.1.2 Member Information Panel

Step	Action	Response
1.	Enter a valid Member ID in the Member ID field in the Search panel.	
2.	Click Search .	The information page for that Member ID displays.

Forward reartif interenange System

Note: You no longer have the ability to change the ID number of a member (the old Cert 5s) through the portal or any other means. Member ID number change requests must be called into EDS-HP, See **Contact Information** at the end of the training guide.

Member Information Panel Graphic



Member Information Panel Description

- The left section of the **Member Information** panel displays a high-level snapshot of a member's information at the time the page is accessed, including CARES PIN, SSN, gender, date of birth, age, etc.
 - o The **MCI Indicator** field is a **Yes** or **No** field that indicates if the member ID is an MCI ID. If 'No', the member ID is a pseudo ID.
- The middle section of the Member Information panel displays address information and other demographic data about the member, including any previous name, if applicable. The address displayed is the member's mailing address.
- The right side of the Member Information panel contains more fields that require some additional explanation.
 - The **Active** field on the Member Information page pertains to the member ID, not enrollment. It indicates the member had two separate IDs and the two IDs are linked keeping one "Active" (Active Field=Yes) and the other "Inactive" (Active Field=No). The **Linked ID** field displays information if the member has another ID that is linked to their present ID.
 - The Case History field uses a drop-down menu to identify the case head member ID numbers and dates for cases the member is/was associated with.
 - The Benefit Plan field also has a drop-down menu that displays the benefit plans in which a member is/was enrolled. The field includes a benefit plan code and the effective dates of each plan.
 - The Medicare Coverage field contains the member's current Medicare coverage
 if active. It is blank if the member does not have active coverage. The field can
 show one or more of the following:

- A for **Medicare Part A**, which is hospital insurance that pays for inpatient hospital stays, care in a skilled nursing facility, hospice care and some home health care.
- B for Medicare Part B, which is medical insurance that helps pay for physician services, outpatient hospital care, durable medical equipment, and some medical services that are not covered by Part A
- **D** for **Medicare Part D**, which is prescription drug coverage.

Note: IC now captures information about Medicare Part A and B. Part D Medicare prescription drug is also captured separately here.

More information on Medicare Enrollment Database (EDB) maintained by the Center for Medicare and Medicaid (CMS) which contains the Part A and B entitlement start date and entitlement status can be found in the next section. This information is made available for those who are interested but this training session will not go into more detail.

- o The **Managed Care Plan** field shows the plan and effective dates if the member is enrolled in a Managed Care Plan.
- If applicable, the MC Special Condition field displays the member's Managed Care Level of Care if enrolled in long term care managed care program, and/or enrollment exemption codes and the corresponding effective/end dates.
- o Similarly, the **TPL** (Third Party Liability) field will be populated with "yes" if the member has active third party insurance coverage,
- The **Lockin** field will be populated if a punitive restriction has been placed against the member, or if the member is enrolled in a hospice program. If a Lockin is in effect, an indicator with effective dates will populate the field.
- o The **NH Level of Care** field is used to display nursing home level of care codes.
- The **Patient Liability** field designates the monthly institutional liability or waiver cost share amounts the member must contribute to their cost of care, along with the effective and end dates of the liability.

Note: The patient liability panel will include patient liability as well as the Waiver and Family Care cost share. Patient liability and Waiver/FC cost share have now been automated to interface with IC.

- o **Deductible** indicates the member's current SeniorCare deductible and effective/end dates. This field does not apply to private insurance.
- The Last Health Check Screening field shows the date of the member's last medical screening.
- The Last Health Check Dental field below it displays the date of the member's last dental screening.
- Let's move on to the Member Maintenance panel at the bottom of the page.

7.1.3 Member Maintenance Navigation Panel

Step	Action	Response
1.	Using the Member ID scroll down to the Member Maintenance navigation panel.	

Member Maintenance – Member Navigation Panel Graphic



Member Maintenance - Member Navigation Panel Description

- The **Member Maintenance** navigation panel displays six different areas of detailed information for a member. Those areas are on the left side of the panel. Clicking one of the categories displays links on the right side of the panel where authorized users can access information. Division of Juvenile Corrections Staff only have access to **Member** and **Previous Data** links.
 - The **Member** area displays general information about the member such as benefit plan enrollment, divestment and ID card status.
 - The **Previous Data** panels display a Member's previous names, addresses, and IDs.

Member ID Cards Panel

Step	Action	Response
1.	Enter a valid Member ID in the Member ID field in the Search panel.	
2.	Click Search .	The information page for that Member ID displays.
	Scroll down to the Member Maintenance navigation panel and click Member ID Cards .	The Member ID Cards panel displays.

Member ID Cards Panel Graphic



Member ID Cards Panel Description

- The **Member ID Card** panel allows you to view the member's ID card issuance history, which includes the reason the ID card was issued (it was new, lost, or stolen, etc.). Members can have up to three ID cards active at the same time if they are, or have been, enrolled in ForwardHealth, WWWP, and SeniorCare.
- The **Card Type** represents the type of card(s) that was issued to the member, based on program enrollment.
- The **PAN** (Personal Account Number) is a 16 digit number that uniquely identifies an ID card in the system. It is not related to the member ID.
- **Source** identifies the source that initiated the ID card to be created.

Worker ID Panel

Step	Action	Response
1.	Enter a valid Member ID in the Member ID field in the Search panel.	
2.	Click Search .	The information page for that Member ID displays.
	Scroll down to the Member Maintenance navigation panel and click Worker ID .	The Worker ID panel displays.

Worker ID Panel Graphic



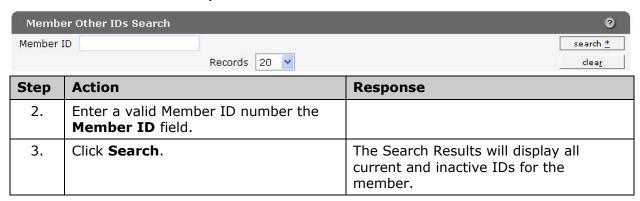
Worker ID Panel Description

- The **Worker ID** panel is used to view the Worker ID of the clerk for the agency responsible for certifying the benefit plan for a given Member.
- Authorized users can use this panel to add, update, or delete Worker IDs.
- The **Worker ID** field displays the Worker ID for the certifying agency.
- The **Benefit Plan** field shows the benefit plan assigned to the Member.

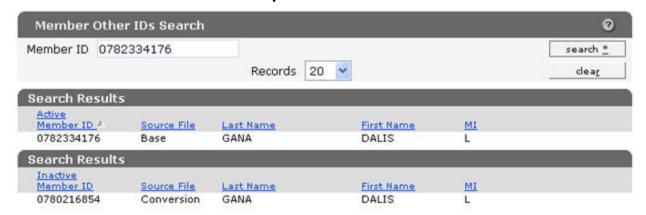
7.1.4 Other ID Search

Step	Action	Response
1.	From the list of iC Functionality links, click Other ID Search .	The Other ID Search panel displays.

Other ID Search Panel Graphic



Other ID Search Results Panel Graphic



Other ID Search and Search Results Panel Description

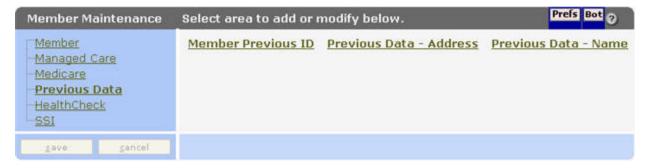
- The **Other ID Search** panel allows a user to view Member IDs that are related to the searched ID.
- An example of a related Member ID might be a previous ID held by the Member or an ID from a case that belongs to the Member.

• If another ID exists, the **Search Results** panel displays the **Current Active ID** number in the first column. The **Source File** column will let the user know how the information was entered in the system. Other IDs might be the result of a converted file or IDs that are linked to another Member ID.

7.1.5 Previous Data

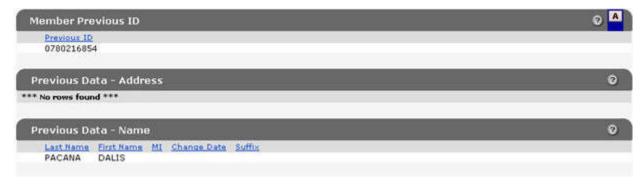
Step	Action	Response
1.	Enter a valid Member ID in the Member ID field in the Search panel.	
2.	Click Search .	The information page for that Member ID displays.
3.	Scroll down to the Member Maintenance navigation panel and click Previous Data .	The Previous Data links display.

Previous Data Panel



Step	Action	Response
4	In the right pane, click the link for the	The selected panel displays.
	information you wish to view.	

Previous Data Panels



Previous Data Panels Description

- The Member Previous Data panels are "view only" panels.
 - o The **Member Previous ID** is used to view a Member's previous Medicaid IDs.

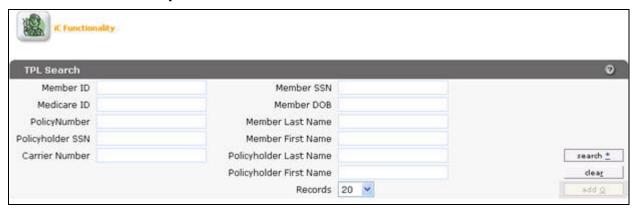
- The Previous Data Address panel displays any previous addresses used by a Member.
- The Previous Data Name- displays any previous names used by a Member, such as a maiden name.
- There are two fields, other than the demographic data, that appear on these panels,
 - The **Source** field on the address panel displays the source of the update to the address.
 - The Change Date field on the address and name panel displays the date the Member's address was changed in interChange. This is a field the user will find on all of the previous data panels.

7.2 Third Party Liability

7.2.1 TPL Search

Step	Action	Response
1.	From the list of iC Functionality links, select TPL Search .	The TPL Search panel displays.

TPL Search Panel Graphic



TPL Search Panel Description

 The TPL Search panel is used to access a member's TPL records using various criteria.

Step	Action	Response
2.	Enter your search criteria in the fields on the search panel.	
3.	Click Search .	If more than one record is found, a search results panel displays (go to step 4).
		If only one record is found, the TPL Information Page displays.
4.	Click the desired record from the Search Results.	The TPL Information Page displays.

7.2.2 TPL Information Page Graphic



TPL Information Page Description

- The **TPL Information** page displays the basic information about the member's TPL policy and also provides access to various panels related to that policy.
- The TPL Information page consists of:
 - The mini-search panel at the top of the page, which allows users to quickly search TPL records using a Member ID.
 - The **TPL Information** panel displays information on specific health coverage programs for the member.
 - o The **TPL Maintenance** navigation panel at the bottom of the page contains links that allow users to access panels with more detailed information regarding TPL.
- The TPL Information panel displays the high level health coverage information for a specific carrier for the member.
- Since we have already discussed many of the fields in this panel, let's take a look at those we haven't seen yet.
 - The MMIS Case field displays the case number of the member.
 - The **Policy Type** indicates whether the member's resource is private pay insurance or state paid insurance.

The Policy Start and End Dates show the effective dates of this coverage.

7.2.3 TPL Maintenance Navigation

- The **TPL Maintenance** navigation panel provides links that allow users to access detailed TPL information.
 - The **Absent Parent** panel displays the information regarding a member's absent parent.
 - The Additional Policies panel displays any additional policies the member may have by the Policy Number, the Effective Dates of the policy, and the name of the Carrier, as well as shows a Verification Code.
 - The Base Information panel lets users view header level information on a TPL request. This is where the data that populates some of the fields in the TPL Information panel can be updated by authorized users.
 - The TPL Coverage panel allows you to view general services coverage information related to TPL by Coverage Code, Coverage Description, and start/end dates.
 - The Members of Policy panel lists all members covered under the TPL policy and displays basic information about each member, such as the Member ID, last and first name, SSN and date of birth.

Absent Parent

Absent Parent Panel Graphic



Absent Parent Panel Description

- This panel displays the information regarding a member's absent parent.
- The information includes First and Last Name, Social Security number, date of birth.
- The information also includes the absent parent's identification number.
- If the absent parent is not a member, the **Absent Parent ID** field will display "-1".

Additional Polices

Additional Polices Panel Graphic

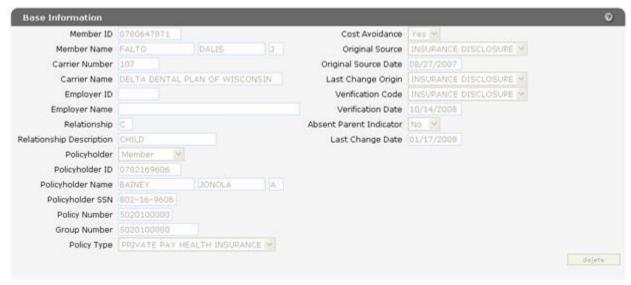


Additional Polices Panel Description

- The Additional Policies panel displays any additional policies the member may have.
 - The panel displays the **Policy Number**, the **Effective Dates** of the policy, and the name of the **Carrier**.
 - The panel also shows a **Verification Code**, which identifies whether the TPL policy is active or suspect for any reason. These codes are maintained in the **Codes>Verification** panel of the Related Data section of TPL, which we will cover later in this training.
- If you click on one of the additional policies, the TPL Information and TPL Base Information panels are updated with that policy's information. You have to expand the base information to see the full details.

Base Information Panel

Base Information Panel Graphic



Base Information Panel Description

- The **Base Information** panel lets you view header level information on a TPL request. This is where the data that populates some of the fields in the TPL Information panel can be updated by authorized users. Some fields you may not be familiar with include:
 - The Carrier Number field displays a unique user-defined carrier ID.
 - o **Carrier Name** displays the business name of the associated carrier.
 - Employer ID displays a unique, user-defined employer ID which is used on all screens and reports to identify the employer.
 - o **Employer Name** displays the name of the employer.
 - The **Relationship** field displays a code that identifies the relationship of the policyholder to the member covered by the TPL policy. This could be **C** for child, **D** for step-child, **E** for self, **O** for other, or **S** for spouse.

- Relationship Description contains the description of the Relationship code.
- The Cost Avoidance field indicates if this policy is allowed to bypass cost avoidance or not.

Note: Cost Avoidance, as opposed to Pay and Chase, is when the service provider bills and collects from liable third parties before sending the claim on to Medicaid.

- Original Source displays where the information regarding this policy originated.
- The Original Source Date displays the date the resource was originally added to the system.
- The Last Change Origin field displays the source of the last revision to the policy information.
- The Verification Code indicates whether the TPL resource is verified and, if so, how it was determined to be verified.
- o The **Verification Date** field displays the date the resource was verified.
- Finally, the **Absent Parent Indicator field** shows if the policy is held by an absent parent.

Coverage Panel

Coverage Panel Graphic



Coverage Panel Description

- The **TPL Coverage** Panel allows the user to view coverage information related to TPL. Authorized users can select coverages to apply to the TPL policy.
 - Coverage Code displays a code that identifies the type of coverage that the TPL policy provides.
 - Coverage Description describes the type of coverage that the TPL policy provides.
 - Coverage Start and End Dates display the effective beginning and end dates of the coverage.

Members of Policy

Members of Policy Panel Graphic



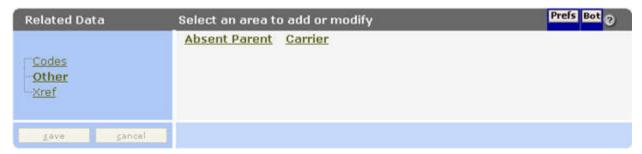
Members of Policy Panel Description

• The **Members of Policy** panel lists all members covered under the TPL policy and displays basic information about each member, such as the Member ID, last and first name, social security number and date of birth.

7.2.4 TPL Related Data

Ste	p	Action	Response
1		From the list of iC Functionality links, select TPL Related Data .	The TPL Related Data panel displays.
2		In the left pane, click Other .	The Other links display on the right of the panel.

TPL Related Data Panel Graphic



• The TPL Related Data panel provides links to various Third Party Liability information panels. The two panels available to Division of Juvenile Corrections Staff are Absent Parent and Carrier.

Absent Parent

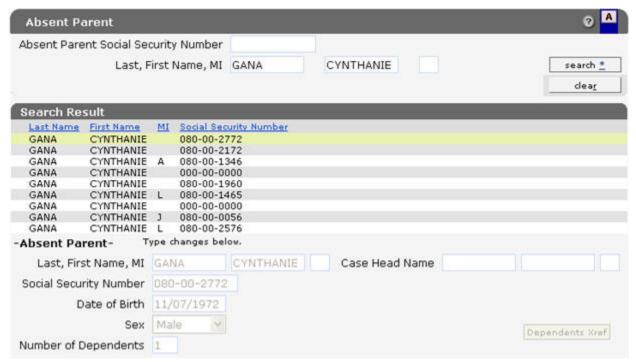
Step	Action	Response
1.	From the links on the right of TPL Related Data panel , click Absent Parent .	The Absent Parent panel displays.

Absent Parent Panel Graphic



Step	Action	Response
2.	Enter a social security number, or at least a last name.	
3.	Click the Search button	The Search Results panel displays.
4.	Select the desired record.	The lower portion of the panel populates with the selected absent parent's information.

Absent Parent Panel Graphic



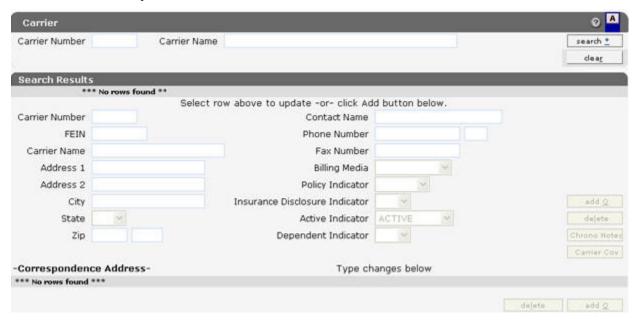
Absent Parent Panel Description

- The Absent Parent panel displays absent parent records received from the Wisconsin Bureau of Child Support.
- These are non-custodial parents who are ordered by a court order to provide TPL coverage to their dependents.
- The **Dependants Xref button** is used to display information on any dependents for whom the absent parent is required to provide TPL coverage.

TPL Other – Carrier Panel

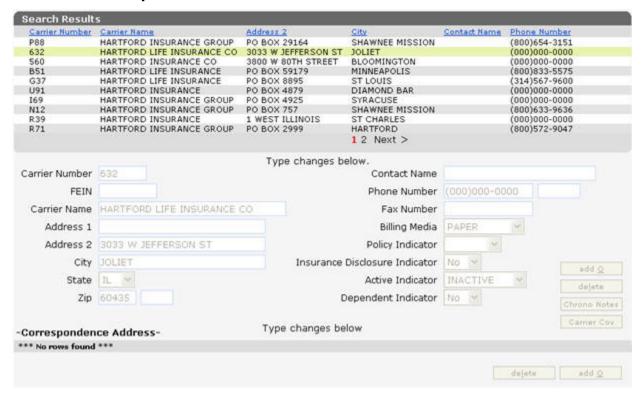
Step	Action	Response
1	On the right of the Related Data – Other panel, click Carrier .	The Other – Carrier panel displays.

Carrier Panel Graphic



Step	Action	Response
2.	Enter a carrier name or number in the Carrier search panel.	
3.	Click Search .	The search results display.
4.	Select the record you wish to display.	The Carrier panel the information displays in the lower section of the panel.

Carrier Panel Graphic



Carrier Panel Description

- The **Carrier** panel contains information about insurance companies that cover Wisconsin residents.
 - The address displayed is the claim submission address, which is used for all claim facsimile billings.
 - If there is a separate correspondence address, it is maintained on another panel that displays below the main panel. The correspondence address is used for all non-facsimile correspondence but is not used by Financial.
 - Authorized users can add and delete carriers using add and delete buttons.
 - The Contact Name is used to address all questions concerning the policy and the carrier
 - FEIN displays the Federal Employer Identification Number of the carrier.
 - Carrier Name displays the business name of the insurance carrier.
 - The **Policy Indicator** field indicates whether the carrier is an HMO or PPO policy provider.
 - The Insurance Disclosure Indicator displays whether or not the carrier participates in Insurance Disclosure.
 - The **Active Indicator** field displays whether the carrier is active or inactive.
 - The **Dependent Indicator** field identifies whether or not the carrier participates of Dependent Indicator

8 Provider

8.1.1 Provider Search

Step	Action	Response
	From the iC Functionality links, click Provider .	The Provider Search panel displays.

Provider Search Panel Graphic



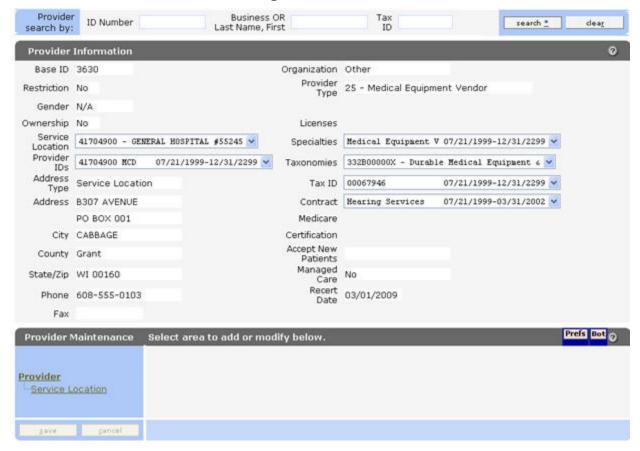


Provider Search Panel Description

- You will generally use the Provider Search function to find provider numbers in order to complete the Remaining Deductible forms that are sent to EDS-HP.
- **Business or Last Name** and **First Name** is the field you will use when completing search. However, as you will soon see, performing a search using the name field can return numerous records. You will be able to sort on any of the headers.
- **Financial Payer** displays the unique program the provider bills to. Examples include Medicaid, Wisconsin Chronic Disease Program (WCDP), Wisconsin Well Woman Program (WWWP) and SSI. By selecting Medicaid, you may limit the results returned.

Step	Action	Response
2.	Enter your search criteria in the fields on the search panel.	
3.	Click Search .	If more than one record is found, a search results panel displays (go to step 4).
		If only one record is found, the Provider Information Page displays.
4.	Click the desired record from the Search Results.	The Provider Information Page displays.

8.1.2 Provider Information Page



Provider Information Page Description

- The **Provider Information** page displays the basic information about the provider.
- The Provider Information page consists of:
 - The mini-search panel at the top of the page, which allows you to quickly search Provider records using a Provider ID.

Note: This is the same panel that displays if you select the Provider Information link, so we don't discuss that here.

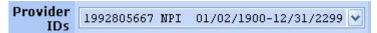
- The **Provider Information** panel displays information on specific health coverage programs for the member.
- The **Provider Maintenance** panel also displays, but there are no information that can be accessed on this panel.

8.1.3 Provider Information Panel

- The **Provider Information** panel provides detailed information on a provider.
 - The Address lines, Phone number, and the Fax number fields are selfexplanatory.
 - o The **Service Location** field utilizes a drop-down menu to list all the service locations for the provider's Base ID. Select this number to include with the NPI and address zip code to include on the remaining Spenddown form.



- Provider IDs drop-down field can be used to view a list of all the Provider IDs associated with this provider and the period of time each ID was active.
 - Next to the Provider ID you will see three initials that indicate the type of ID listed, it will either be NPI for the National Provider ID, or MDC for a ForwardHealth Assigned ID. You may also see CNV for a Converted ID or BSE for a Base ID. Always choose the NPI number.
 - One other thing to notice on this field is the Provider ID Effective and End Dates. This signifies the period the specific ID is in effect. If the End date is 12/31/2299, it signifies an open end date. Use the current ID for the remaining deductible form.



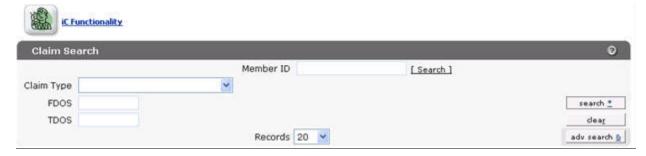
 The Address Type field will always show Service Location, which is the physical address listed for the provider's practice. Select the provider Zip code from the address to include with the NPI ID and Service Location number.

8.2 Claims Search

8.2.1 Claim Search Panel

Step	Action	Response
1.	From the iC Functionality links, click	The Claim Search panel displays.
	Claims Search.	

Claim Search Panel Graphic



Claim Search Panel Description

- The **Claim Search** panel allows you to search for claims using the following selection criteria.
 - Member ID
 - FDOS (From Date of Service) is the date of first service on the claim.

And

o **TDOS** (To Date of Service) is the date of last service on the claim.

Note: If you enter only one date, the other date will default to the same date and the search will return only results for that date.

- You are also required to enter at least one of these fields:
 - Claim Type is the indicator or nomenclature of the claim processed in interChange based on claim form or electronic transaction.

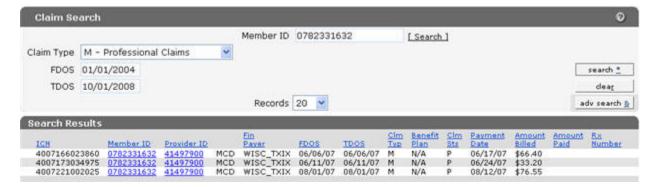
Or

 Claim Form is the form type of the claim to be selected as part of the search criteria, such as **Dental** or **Pharmacy**. You must click the **Advanced Search** button to display the Claim Form Field

8.2.2 Claims Search Results Panel

Step	Action	Response
2.	Enter a valid Member ID .	
3.	Enter either the Claim Form or Claim Type.	
4.	Enter the FDOS and TDOS .	
5.	Click Search .	The Claims Results panel displays.

Claims Search Results Panel



 The Claim Search Results panel displays information about claims matching the search criteria:

- o **ICN (Internal Control Number)** a unique identification number assigned to each claim in the system. The ICN is the identifying means through which each claim is processed, tracked, and reported.
- Notice that the Financial Payer is Title 19 (TXIX), and that the Health Program (also referred to as the Benefit Plan) used is MCD.
- The three-letter code after the Provider ID shows the **Health Program** used to process the claim. Such as MCD for Medicaid.
- Financial Payer displays the unique organization the claims transactions processed under. Examples include Title 19 (WISC-TXIX), which is Medicaid/BadgerCare, WCDP (Wisconsin Chronic Disease Program), WWWP (Wisconsin Well Woman Program) and County Waivers.
- o That's followed by the From and To Dates of Service.
- o Other important data is the **Claim Status**. Valid values include: "P" = Pay, "S" = Suspend, "D" = Deny, "X" = Super-Suspend, "R" = Resubmit.
- o And the **Payment Date** and the **Amount Billed** and **Amount Paid**.

9 General Portal Information

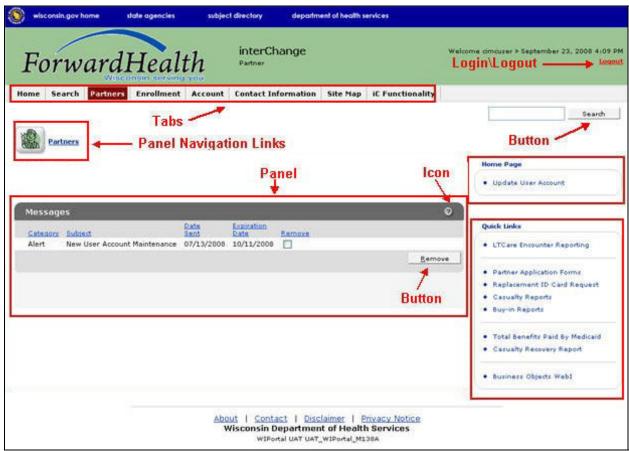
9.1 Logging On and Off the Portal

The quickest way to log onto the Portal is to click the <u>Login</u> link in the upper-right corner of any screen, and enter your username and password. Once you log in, the link changes to **Logout**.

When you are finished with any session, always remember to click the **Loqout** link.

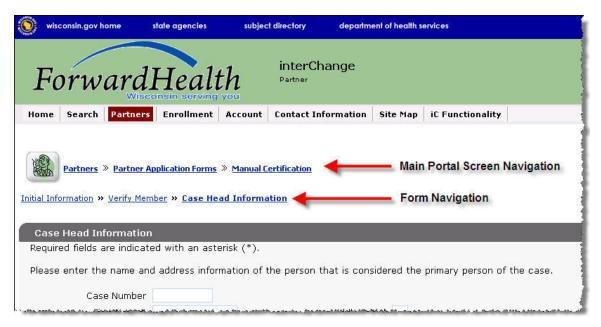
9.2 Portal Navigation

There are several navigation features on every screen and/or panel that display on the portal pages and panels.



- **Tabs**—Once you log in to the secure partner portal, the first tab that displays is the Partners tab. Click on any other tab to move to different parts of the Portal.
 - Home takes you back to the public portal Home page.
 - Search displays a text box to enter text, and you can select an area to search Partners
 - **Enrollment** displays the Enrollment Verification panel, which lets you verify that a member is enrolled through his or her Member ID or SSN, and date of birth. This is a summary level verification tool.

- **Account** lets you manage your main account information, messages, and change your password. It also contains a link to the user guide for this tab, which is in PDF format.
- Contact Information lets you ask a question of tech support.
- **Site Map** is a series of links that imitate the tab structure and tab choices.
- **iC Functionality** is a subset of the panels you can access through the portal which Provide more detailed member information.
- **Panel**—The panel shown here is the Message panel that lets you know if there are any changes or new items for the Partner portal.
- **Login/Logout**—This is a link that toggles between displaying the username/ password text boxes (**Login**) or logging you out of the system (**Logout**).
- Other features: links at the bottom (About, Contact, Disclaimer, Privacy Notice) and top (Wisconsin.gov home, state agencies, subject directory, and department of health services) are part of every standard portal window and lets you know Statespecific information.
- **Panel Navigation** links—One of the features of the portal to help you track what links you've clicked to end up on the current screen, such as shown in this example:



- o The Main Portal Screen Navigation displays links display you clicked from the main Partner page to get to your present form or screen.
- The Form Navigation links display tells you how far you've progressed into an online form, as well as the order. If you click the **Previous** button, you will go one link backwards; for example, from **Case Head Information** to **Verify Member**. If you click on a navigation link, you go directly to that page or panel.
- It is important to note that users should **never** use your browser's **BACK** button to return to a previous screen.

9.2.1 Buttons

Below is a list of common buttons and the operations they are normally used for.

Button	Click it and this happens
Clear	Clears all the information entered into the fields on a panel.
Close	Closes a window, such as a popup window.
Save	Saves a modification made to a panel or a new record (for authorized users that can make updates)
Remove	Deletes an onscreen message.
Search	Initiates a search.

9.2.2 Error Messages

Error messages most commonly appear when you enter information incorrectly in a field or when you do not enter information in a required field. These error messages display just beneath the navigation links at the top of a panel but may also appear next to a field that is in error. Messages also display as a warning that the user is navigating away from a page.



Partners >> Partner Application Forms >> Manual Certification

Initial Information » Verify Member » Case Head Information Eligible Case Members

The following messages were generated:

Last Name is required.

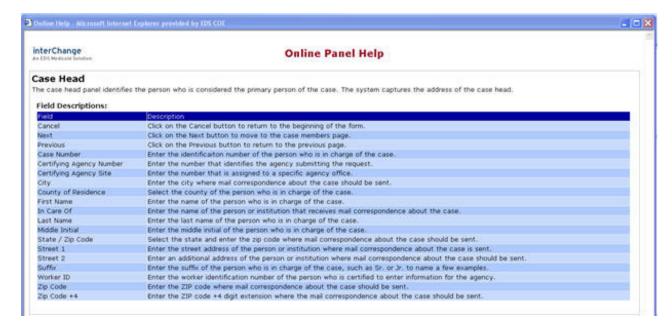
• If unsure what an error message means, users can find more error message information by clicking the question mark icon on the gray bar at the far right of each screen. The panel help with all field descriptions and error messages will appear.

9.3 Partner Portal Online Help

9.3.1 Panel Help

Panel help is accessed by clicking the question mark icon on the gray bar at the far right of each screen.



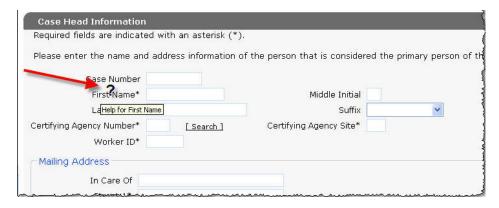


Panel Help Feature - Question Mark Function Description

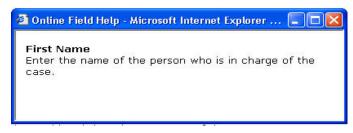
➤ The panel help lists the name of all fields and buttons on the panel (buttons alphabetically first, then fields alphabetically), along with their descriptions and error messages. These descriptions are the same as what users see when users access field help.

9.3.2 Field Help

> If users hover over the name of a field, users will see a question mark:



• When you click on the field, you see a pop-up box that includes the field description.



10 Contact Information

EDS-HP is responsible for providing support to IM Workers. The document below provides contact information for EDS-HP.

	EXTENTION 80221	EXTENSION 80220	EXTENSTION 80213
Agency Assignments	001 Adams	040 Milwaukee	030 Kenosha
Eligibility	002 Ashland	044 Outagamie	031 Kewaunee
P.O. Box. 7636	003 Barron	045 Ozaukee	032 LaCrosse
Madison, WI 53713	004 Bayfield	046 Pepin	
	005 Brown		033 LaFayette
(608) 221-4746	006 Buffalo	049 Portage	034 Langlade 035 Lincoln
		051 Racine	
	007 Burnett	053 Rock	036 Manitowoc
	008 Calumet	058 Shawano	037 Marathon
STAFF/CERTIFYING	009 Chippewa	D59 Sheboygan	038 Marinette
	010 Clark	060 Taylor	039 Marquette
AGENCY	011 Columbia	061 Trempealeau	047 Pierce
ASSIGNMENTS	012 Crawford	062 Vernon	048 Polk
	013 Dane	063 Vilas	050 Price
	014 Dodge	070 Winnebago	052 Richland
	015 Door	071 Wood	054 Rusk
	016 Douglas	072 Menomonie	055 St. Croix
	017 Dunn	080 RNIP	056 Sauk
	018 Eau Claire	090 RNIP	057 Sawyer
	019 Florence	100s - 600s	064 Walworth
	020 Fond du Lac		065 Washburn
	021 Forest		066 Washington
	022 Grant		067 Waukesha
	023 Green		068 Waupaca
	024 Green Lake		069 Waushara
	025 Iowa		830 Katie Beckett
	026 Iron		
	027 Jackson		
	028 Jefferson		
	029 Juneau	Eligibility Supervis	or Ext. 80202
	041 Monroe	Eligibility Team Le	
	042 Oconto		horizationExt 80201
	043 Oneida	SLMB/OMB/Buy-Ir	
	0 to Chicida	EDS TPL/COB	Ext. 80058

Resource Prior to November 10, 2008 ForwardHealth InterChange Implementation	Resource On and After November 10, 2008 Forward-Health interChange Implementation
Member Services (BadgerCare Plus and Medicaid) 800-362-3002 • Available 7:30 a.m5:00 p.m. Monday-Friday Member Services (WCDP) 608-221-3701 • Available 8:30 a.m4:30 p.m. Monday-Friday Member Services (WWWP) - Not currently available	Member Services (all programs except SeniorCare) 800-362-3002 • Available 7:00 a.m6:00 p.m. Monday-Friday
Member Services (SeniorCare) 800-657-2038 Available 7:30 a.m5:00 p.m. Monday-Friday	Member Services (SeniorCare) 800-657-2038 Available 7:00 a.m6:00 p.m. Monday-Friday
Medicaid Managed Care Contract Monitors and Ombudsmen 800-760-0001 Recipient appeals and grievances regarding State Contracted Managed Care Organizations Available 8:00 a.m4:30 p.m. Monday-Friday	ForwardHealth Managed Care Ombudsmen (BadgerCare Plus only) 800-760-0001 Recipient appeals and grievances regarding State-Contracted Managed Care Organizations Available 8:00 a m4:30 p.m. Monday-Friday
Medicaid and BadgerCare Plus Web Sites dhs.wisconsin.gov/medicaid/ dhs.wisconsin.gov/badgercareplus/ ForwardHealth Implementation Information Web Site dhs.wisconsin.gov/forwardhealth/ ForwardHealth Portal Web Site – Trading Partners only www.forwardhealth.wi.gov/	Forwardhealth Portal Web Site – Providers, Trading Partners, Partners, HMOs • www.forwardhealth.wi.gow Forwardhealth Portal Web Site – Members • www.forwardhealth.wi.gow/members
Webcasts this wisconsin gov/forwardhealth/	Webcasts www.forwardhealth.wi.gov/

Appendix A - ForwardHealth Benefit Plans

Full Benefit Plans	Note: BadgerCare, Family MA & Healthy Start med stats (benefit plans) ended 01/31/08. They were replaced by BadgerCare Plus effective 02/1/08.
ВС	BadgerCare
BCSP	BC+ Standard Plan
ВСВР	BC+ Benchmark Plan
BCBPD	BC+ Benchmark Plan and Dental
MCD	Medicaid
MCDW	Medicaid Waiver
MAPW	Medicaid Purchase Plan Waiver
MAP	Medicaid Purchase Plan
WWMA	Wisconsin Well Woman Medicaid
SSIMA	Medicaid for SSI
FSTMA	Medicaid for Foster Care
Limited Benefit Plans	
BCBEE	BC+ Benchmark Express Enrollment for Pregnant Women
BCSEE	BC+ Standard Express Enrollment for Pregnant Women
PE	Presumptive Eligibility - Pregnancy
FPW	Family Planning Services Only
FC	Family Care Non-MA
QMB	Qualified Medicare Beneficiary
SC1	Senior Care Level 1- 0 to 200% FPL
SC2	Senior Care Level 2- Over 200% FPL
WCDK	Wisconsin Chronic Disease-Renal Disease
WCDH	Wisconsin Chronic Disease-Hemophilia HomeCare
WCDC	Wisconsin Chronic Disease-Adult Cystic Fibrosis
WWWP	Wisconsin Well Woman Program
Benefit plans without health services	There are no health care services payable for these benefit plans. The state pays Medicare premiums or issues other cash benefits.
SLB	Specified Low-income Medicare Beneficiary
SLB+	Specified Low-income Medicare Beneficiary Plus
QDWI	Qualified Disabled Working Individuals
SSI	State Supplemental Payment - State Supplemental Income
SSIE	State Supplemental Payment - State Supplemental Income Exceptional
CTS	State Supplemental Payment - Caretaker Supplement